

Substance Abuse and Mental Health Services AdministrationDISASTER TECHNICAL ASSISTANCE CENTER

RESOURCE LIST Self-Care

Prepared by the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC), ESI, under contract with the Emergency Mental Health and Traumatic Stress Services Branch, Center for Mental Health Services, SAMHSA.

Peer-Reviewed Journal Articles

Cassidy, J. (1991). Compassion fatigue. Healthcare professionals are vulnerable as care giving becomes more stressful. *Health Progress*. 72(1):54-5, 64.

The author provides a general overview of compassion fatigue, including warning signs, consequences, and what employers can do to help health care workers avoid burnout. The article also provides some alternative approaches to combating compassion fatigue

Collins, S. and Long, A. (2003). Too tired to care? The psychological effects of working with trauma. *Journal of Psychiatric Mental Health Nursing*. 10(1):17-27.

A quantitative and qualitative longitudinal study assessing the effects on caregivers of working with severely traumatized people. Findings indicate that a sense of team spirit and life satisfaction combat compassion fatigue, while media attention and angry, bereaved relatives contribute to compassion fatigue.

Figley, C.R. (2002). Compassion fatigue: Psychotherapists' chronic lack of self care. *Journal of Clinical Psychology*. 58(11):1433-41.

The authors compare and contrast compassion fatigue with simple burnout and stress. The article includes a model of compassion fatigue which suggests that learning to separate from work both emotionally and physically, managing caseloads, and dealing with traumatic stress can all help to limit compassion fatigue.

Enos, G. (2001). How do we help the helpers? *Behavioral Healthcare Tomorrow*. 10(6):SR32-3.

The author discusses the issues surrounding a sharp increase in critical-incident response calls for corporate clients of a behavioral health care company following September 11.

Huggard, P. (2003). Compassion fatigue: How much can I give? *Medical Education*. 37(2):163-4.

This editorial discusses empathy and its role in compassion fatigue. The author suggests that compassion fatigue can result if the caregiver lacks appropriate personal survival skills.

Peer-Reviewed Journal Articles (continued)

Joinson, C. (1992). Coping with compassion fatigue. Nursing. 22(4):116-20.

The author discusses the prevalence of compassion fatigue among nurses and clergy who work in hospitals, and provides a list of characteristics to help management recognize the symptoms of compassion fatigue.

Keidel, G.C. (2002). Burnout and compassion fatigue among hospice caregivers. *American Journal of Hospice and Palliative Care*. 19(3):200-5.

This article is a literature review that discusses the concept of burnout among hospital staff, and ways to prevent and combat compassion fatigue. The article focuses on hospice care workers.

Kinzel, A. and Nanson, J. (2000). Education and debriefing: Strategies for preventing crises in crisis-line volunteers. *Crisis*. 21(3):126-34.

This article discusses how crisis-line volunteers may be exposed to extensive pain and suffering, the results of which may carry over into their personal lives. Compassion fatigue may be prevented through debriefing and education.

McNally, V.J. (1999). FBI's Employee Assistance Program: An advanced law enforcement model. *International Journal of Emergency Mental Health*. 1(2):109-14.

This article describes the Federal Bureau of Investigation's efforts to enhance its employee assistance program by including Critical Incident Stress Management debriefing training.

Penson, R.T., Dignan, F.L., Canellos, G.P., Picard, C.L., and Lynch, T.J. Jr. (2000). Burnout: Caring for the caregivers. *Oncologist.* 5(5):425-34.

Using vignettes from The Kenneth B. Schwartz Center, the author describes the end results of stress and emotional exhaustion on the professional lives of hospital and hospice staff. A roundtable presentation addressing the main issues that contribute to compassion fatigue, and preventive measures such as coping mechanisms and psychological support of the health care team are included.

Pickett, M., Brennan, A.M., Greenberg, H.S., Licht, L., and Worrell, J.D. (1994). Use of debriefing techniques to prevent compassion fatigue in research teams. *Nursing Research*. 43(4):250-2.

The authors discuss patterns of stress reactions observed in clinical practice settings. The authors apply the Critical Incident Stress Debriefing model to victims of house fires.

Radziewicz, R.M. (2001). Self-care for the caregiver. *Nursing Clinics of North America*. 36(4):855-69.

The article helps nurses and other caregivers to identify personal stressors, evaluate methods to reduce stress, and avoid burnout and compassion fatigue. The author advises that caregivers who are compassionate toward themselves are more aware of the needs of others and, therefore, better caregivers. Regulation of emotional stressors, the boundaries of a therapeutic relationship, and the biochemistry of stress are addressed.

Peer-Reviewed Journal Articles (continued)

Rowe, M.N. (1999). Teaching health-care providers coping: Results of a two-year study. *Journal of Behavioral Medicine*. 22(5):511-27.

This study examines coping strategies and long-term results in health care providers. Participants who received one-hour coping refresher sessions throughout a two-year recovery period showed less burnout and compassion fatigue than participants who did not receive refresher sessions.

Wagner, R., Manicavasagar, V., and Silove, D. (2002). Challenges and early experiences in the development of an anxiety clinic in the public health sector. *General Hospital Psychiatry*. 24(6):406-11.

The authors discuss the factors involved in establishing specialist anxiety clinics in the public sector of Australia. Results indicate that the clinics, a partnership between mental health and community health serving as a research unit, are cost-effective, and a step-by-step model is included. The clinics also serve as an opportunity for the public to access specialists.

Wee, D. and Myers, D. (2003). Compassion satisfaction, compassion fatigue, and critical incident stress management. *International Journal of Emergency Mental Health*. 5(1):33-7.

This study examined the risk of compassion fatigue in a group attending a workshop on Prevention of Compassion Fatigue at an international conference of providers of Critical Incident Stress Management services. Results indicate that although the work is stressful, the rewards offset the sacrifices.

Welsh, D.J. (1999). Care for the caregiver: Strategies for avoiding "compassion fatigue." *Clinical Journal of Oncology Nursing*. 3(4):183-4.

This is an editorial providing strategies to prevent compassion fatigue among oncology nurses.

White, G.D. (1998). Trauma treatment training for Bosnian and Croatian mental health workers. *American Journal of Orthopsychiatry*. 68(1):58-62.

An effective trauma treatment training program was developed for Bosnian and Croatian mental health workers to combat compassion fatigue and burnout. This article discusses plans for future development of the program and ways to apply its base principles to other programs.

SAMHSA and Other Publications

Substance Abuse and Mental Health Services Administration (SAMHSA)

Center for Mental Health Services

Stress Prevention and Management Approaches for Rescue Workers in the Aftermath of Terrorist Acts

SAMHSA's National Mental Health Information Center

Center for Mental Health Services Self-Care Tips for Emergency & Disaster Response Workers

SAMHSA and Other Publications (continued)

SAMHSA's National Mental Health Information Center

Center for Mental Health Services

After a Disaster: Self-Care Tips for Dealing with Stress

State Program Materials

South Dakota FEMA Crisis Counseling Program

Signs of Burnout

FEMA Crisis Counseling Program

Taking Care of the Caregiver

New Mexico FEMA Crisis Counseling Program

Watch Out for Compassion Fatigue